

Committee Testimony of
Wayne Wright, Member
Association of Connecticut Ambulance Providers
President of Ambulance Service of Manchester, LLC and Aetna Ambulance Service, Inc.

Human Services Committee
Tuesday, March 15, 2011

Senator Musto, Representative Tercyak and distinguished members of the Human Services

My name is Wayne Wright. Member of the Association of Connecticut Ambulance Providers.

I am speaking on behalf of our membership and two ambulance companies who I work for in opposition of section(s) 10, 11, and 12 of the Governor's Bill No_ 1013, *An Act Implementing the Governor's Budget Recommendations Concerning Human Services*.

These sections outline recommendations to modify statute and introduce the concept of a "stretcher van" as an accepted means of transportation for medical patients confined to a stretcher and "who must be transported in a prone position".

We believe this proposal is categorically unsafe for the following reasons: Connecticut's current Medical transportation system has a high integrity for patient evaluation, determination of medical necessity and assignment of the proper mode of transportation.

Transportation of Non emergency patients is separated into two categories

1. Those who can tolerate a wheelchair for transport and who don't require Special lifting or moving equipment, and who don't require medical surveillance.
2. Those who through their medical condition, require a stretcher, and specialized equipment to lift and move the patient from their point of pick up to the stretcher, and from their stretcher to their point of destination. These patients by virtue of the physical-medical disability require the special training of ambulance personnel to lift, move, and carry the patient into and out of their residence.

I would like to discuss the financial concerns I have about this proposed bill.

- 1) The most current information I have (2008 year) of non emergent ambulance transports which Medicaid reimburses providers was 16,406 trips at a base rate of \$218.82 which totals \$3,589,960.

Amount proposed as savings per year in bill	\$6,000,000
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If 50% of trips went Stretcher van at \$110.00 per trip STATE SAVINGS	\$892,650
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- 2) The proposal of this new means of transportation would cause many patients currently being transported by ambulance to be transported by stretcher van. Stretcher van is not reimbursed by Medicare. Many patients would are currently covered for non emergent ambulance transportation by Medicare (estimate 40%) would then look to Medicaid for reimbursement of this lesser service.

Estimate that 40% of estimated 30,000 non emergent stretcher van calls At an estimated new lower service cost of \$110.00 NEW STATE COST	\$1,320,000
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NET ADDITIONAL COSTS TO STATE MEICAID PROGRAM	\$427,350
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